

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000172741

**Entity Name:** LIVE YOUNG PLLC

**Current Principal Place of Business:**

1680 SW SAINT LUCIE WEST BLVD  
#204  
PORT SAINT LUCIE, FL 34986

**Current Mailing Address:**

318 SE FISK RD  
PORT SAINT LUCIE, FL 34984

**FEI Number:** 38-3943658

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

KENNEDY, TIMOTHY M  
1680 SW SAINT LUCIE WEST BLVD  
#204  
PORT SAINT LUCIE, FL 34986 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Authorized Person(s) Detail :**

Title AP  
Name KENNEDY, TIMOTHY M  
Address 318 SE FISK RD  
City-State-Zip: PORT ST LUCIE FL 34984

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** DR. TIMOTHY KENNEDY

**OWNER**

**02/09/2019**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date